PART B - FEE(S) TRANSMITTAL

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indi mai c	20350 7.	TE ADDRESS (Note: Use Block 1 for 190 10/27/2005 ND TOWNSEND AT	any change of address)		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
12/30/2 01 FC:1 02 FC:1						Kim Dufar December	ilt Daule	itst class main in an envelope so above, or being facsimile date indicated below. (Depositor's name) (Signature) (Date)	
	APPLICATION NO. FILING DATE FIRST NAMED				D INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
<u> </u>	10/713,576	11/12/2003	Shyam Kapi			TOR	017887-011010US	8249	
TIT	TITLE OF INVENTION: SYSTEMS AND METHODS FOR GENERATING CONCEPT UNITS FROM SEARCH QUERIES								
	APPLN. TYPE	PPLN. TYPE SMALL ENTITY ISSUE		EE .	E PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE	
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CFF	 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
((A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Y ahoo! Inc.								
						D	·		
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government 4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies Advance Order - # of Copies Deposit Account Number Deposit Account Number									
C	a. Applicant claims S	(from status indicated above MALL ENTITY status. See	e) 37 CFR 1.27.	☐ b. Applic	ant is no	longer claiming SMA	LL ENTITY status. See 37	CFR 1.27(g)(2).	
The NO inter	Director of the USPTO TE: The Issue Fee and Prest as shown by the rec	is requested to apply the Issi sublication Fee (if required) vords of the United States Page	ue Fee and Publicate vill not be accepted and Trademark	tion Fee (if and from anyone Office.	ny) or to e other th	re-apply any previousl nan the applicant; a regi	y paid issue fee to the appli stered attorney or agent; or	cation identified above. the assignee or other party in	
_ 1	Authorized Signature David V. Rossi Pec. 27, 2005 Registration No. 36,659								

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